



*Congresswoman Stephanie Murphy
Representing the Seventh Congressional District of Florida*

Legislative Summary of H.R. 4541, the CHAMPIONING HEALTHY KIDS Act

Reauthorizes CHIP (Title II)

- Reflects the bipartisan Hatch-Wyden agreement (S. 1827). Provides for a full CHIP extension for 5 years, including Maintenance of Effort protections and continuation of the ACA's 23 percentage point "bump" in payments to states through FY 2019 (and beginning to phase down the bump in FY 2020). Also includes a 5-year extension of the Childhood Obesity Demonstration Project, the Pediatric Quality Measures Program, and outreach and enrollment grants to states and territories.

Reauthorizes Community Health Centers and Other Public Health Programs (Title I, Sections 101-105)

- A 2-year extension of important bipartisan public health programs at current funding levels, including Community Health Centers, the National Health Service Corps, the Special Diabetes program, and the Personal Responsibility Education program.
- A 2-year extension and increased funding for both the Family-to-Family Health Information Centers program and the Teaching Health Center Graduate Medical Education program. The Family-to-Family Health Information Centers program is extended to each of the five U.S. territories, which are currently excluded from the program.

Increases Cap on Federal Medicaid Payments to U.S. Territories (Title I, Section 107)

- Americans living in the five U.S. territories are treated inequitably under the Medicaid program. Unlike the states, each territory is subject to annual cap on federal Medicaid payments and each has a federal contribution (FMAP)—55 percent—that bears no discernible relationship to the territory's per capita income.
- The bill would increase Puerto Rico's Medicaid cap by \$1.6 billion annually between FY 2018 and FY 2022 (\$8 billion total), increase the U.S. Virgin Islands' Medicaid cap by \$55 million annually between FY 2018 and FY 2022 (\$275 million total), and increase the Medicaid caps in Guam, American Samoa, and the Northern Mariana Islands by a total of \$150 million. The bill also extends the time period in which the four smaller territories can draw down remaining federal Medicaid funding increases provided in the Affordable Care Act, from the end of FY 2019 to the end of FY 2022.

Supports Medicaid Programs in States That Enroll Individuals from Puerto Rico and the U.S. Virgin Islands Displaced by Hurricanes (Title I, Section 108)

- Provides \$1 billion to reimburse states and stateside providers for Medicaid costs incurred for providing care to individuals from Puerto Rico and the U.S. Virgin Islands who were displaced by hurricanes, provides for a streamlined process for displaced individuals to enroll in a state's Medicaid program, and provides a 100 percent FMAP for those individuals for 24 months. With respect to the Medicaid programs in Puerto Rico and the U.S. Virgin Islands, provides for a 100 percent FMAP for 24 months and streamlines the process for enrollment.

Cancels Medicaid Disproportionate Share Hospital (DSH) Cuts for 5 Years Without Setting Up Deeper Cuts Later On (Title I, Section 106)

- H.R. 3922 provided a 2-year cancellation of Medicaid DSH cuts, but paid for these cuts by creating even larger cuts to these hospitals in the future.
- By contrast, this bill offers long-term certainty to hospitals by eliminating all Medicaid DSH cuts for 5 years (through FY 2022) and reducing DSH cuts for 3 years (FY 2023 to FY 2025) until the cuts expire in FY 2025.